	Attorney General Chris Carr Meeting Request Form
me/Position/Title	

Name/Position/Title					
Company/Organization					
Street Address					
City		State		Zip	
Phone Number		Cell Number			
Email Address					
Assistant's Name					
Assistant's Email Address		Assistant's Phone Number			
Meeting Details					
Affiliated Agencies (if applicable)					
*Officials/Special Attendees					
*Attendees (please list the name & title of each attendee)					
*Topics to be discussed (please be specific)					
**Date/Time (Please provide up to 3 requested dates with available times in order of priority.)	Preferred Date	Oį	otion 2		Option 3

Please email to Gina McKinney | gmckinney@law.ga.gov

*Required information needed before a meeting can be confirmed.

**Please be advised that Attorney General Carr's schedule is subject to change due to unforeseen circumstances. In the event that this meeting needs to be rescheduled, you will be notified as soon as possible.